

State of Rhode Island Public Utilities Commission GAS MARKETER APPLICATION Statement of Business Operation (SBO)

1.	Corporate and local company name.
2.	Business Address.
3.	Location of Primary Facilities, including a description of any facilities in Rhode Island.
4.	Evidence of Authorization from Rhode Island Secretary of State (Provide Copy of Authorization).
5.	Name and address of service agent (Must be Physically located in the State of RI).
6.	Attorney of Record.

Listing of corporate officers with titles.	
List of Ten Percent or greater stockholders or partners.	
Documentation of Initial Capitalization or Financial Soundness such as an Audited F. Statement.	Financia
General Description of Operations.	
Description of Customer Service Organization (Include primary contact, phone numerial address).	ber and
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12	2. Regulatory Contact including Name, Title, Phone Number and Email Address.	
13	3. Affirmation that the applicant will comply with the Regulations for Utility Interaction Marketers, the Rhode Island General Laws and all rules and regulations promulgated Public Utilities Commission and Division of Public Utilities and Carriers. (Note: The Affirmation should include the signature and title of a company official and date).	
	Signature	
	Date	